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ABSTRACT

This guide for setting up an educational program on Human Immunodeficiency Virus (HIV) and Acquired Immune Deficiency Syndrome (AIDS) is divided into four sections: (1) "A School's Role"; (2) "How To Help Your School Set Up a Good HIV and AIDS Education Program"; (3) "A Checklist for Picking a Good HIV Curriculum"; and (4) "Resources." The first section discusses the school's role in teaching children who are infected with HIV, helping children who have a family member with AIDS, and teaching children how to avoid getting HIV. Section 2 offers suggestions on steps parents or others in the community can take: find out what information is needed; find out what the school is already doing; talk to other parents and school personnel; set up an advisory committee; think about what may block the program; present a plan to the school board; with the school board's approval, work with school staff in selecting curricular materials, training staff, and training students to teach other students. The checklist in section 3 contains 23 items. The resource list in section 4 includes guides, manuals, and bibliographies; HIV curricula; HIV videos; and national AIDS hotlines and clearinghouses. Two appendices provide factual information on why teens are at risk for getting HIV infection and basic facts about HIV and AIDS. (LL)

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STEPS

TO HELP YOUR SCHOOL SET UP AN AIDS EDUCATION PROGRAM

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This information is for adults who want to help schools set up an HIV and AIDS education program. It is for parents. It is also for other adults in the community who want to help.

I. A School's Role

Schools can help in the AIDS crisis in three ways:

1. **Teaching children who are infected with the Human Immunodeficiency Virus (HIV).** HIV is the virus that causes AIDS. Most children who are infected with HIV can be in school. They pose no risk to other children at school. All schools should have a policy even if they do not know of children infected with HIV who are now enrolled.

2. **Helping children who have a family member with AIDS.** Each school should have one staff member who is an AIDS Resource Person. He or she must know where there is help in the community for a person with HIV infection or AIDS. All other staff should learn this information, too.

3. **Teaching children how to avoid getting HIV.** Right now, there is no cure for HIV infection or for AIDS. Schools must teach students how not to get infected with HIV.

II. How to Help Your School Set Up A Good HIV and AIDS Education Program

Public schools must play a big role in giving students the facts they need to avoid getting HIV infection.

Some schools already have an HIV curriculum. Some curricula are better than others. National Coalition of Advocates for Students (NCAS) feels that an HIV curriculum should be part of a larger health education and sex education program. This course should present the good aspects of sex as well as the dangers of sex. The basic facts about HIV protection can be given in three to five lessons. It takes much longer, however, to help students build self-esteem and learn the skills to make good decisions about sex and drugs.

A good health education program can help students gain self-confidence. It can teach them to make healthy decisions about behaviors that put them at risk for getting HIV. It can also teach students to make healthy decisions about other health behaviors. The program should begin in kindergarten and continue through high school.

Not many schools have this kind of health education program from kindergarten to 12th grade. Parents can help their schools set up a good HIV education project. In the long run, though, parents should help the school set up a larger health education and sex education program. The AIDS crisis has made school administrators more open to ideas about good health education programs.

Here are some steps a parent or community person can take:

- **Learn about HIV and AIDS.**

- **Find out what information is needed.** Ask teens what they know about HIV/AIDS and other sexually transmitted diseases (STDs). Ask them what they would like to learn.

- **Find out what the school is already doing about HIV and health education.** Many schools offer some HIV/STD education. Often, this effort is only an assembly or one lesson in a gym class. These are not enough.

- **Talk to other parents, the school principal, teachers, and other people in the community.** Talk to as many parents as you can. Find out what they would like an HIV education program to do. Talk to the school nurse. Talk to the health teacher, if there is one. Talk to the guidance counselor. He or she may be working with students who have a family member with AIDS. Talk to school administrators. In the community, talk to:
  - local health department
  - clergy at local churches
  - mental health agencies
  - family planning agencies
  - youth services agencies
  - student leaders

  All these people will have ideas.

  For good advice, a parent can also call:
  - the health education staff of the school district
  - the AIDS education staff of the State Department of Education/the AIDS education staff of the state Department of Public Health
  - the Red Cross
  - local independent AIDS service groups

- **Set up an Advisory Committee.** You have now talked to a lot of people. Ask some of the people who have given ideas to be on a committee to help you plan. Ask one or two students

to be on the committee. Above all, ask at least one key school administrator to be on the committee. Be sure the Advisory Committee reflects the racial and ethnic groups in the community.

- **Think ahead about what may block this HIV education program.** Do the planners have goals? Is there a lack of funds? Do teachers need training in how to teach about HIV? Think ahead of time about how to get past these blocks.

- **Give a plan to the school board.** Ask the school board to pass a mandate for HIV education for all students. Ask the school board to let the Advisory Committee and school staff select a curriculum and work out the details for the actual program.

When the Advisory Committee has the approval of the school board, the next step is to work with school staff to put a good HIV education program in place. Parents can help school administrators and teachers.

- **Pick curricular materials.** Some curricula are better than others. The National Coalition of Advocates for Students has reviewed several. See pages 13-14 for information about three good curricula. Be sure to keep in mind the checklist on pages 9-11 when deciding about curricular materials.

  There are many good films and videos on AIDS for teens. Suggestions are on pages 14 and 15.

- **Train staff.** Many teachers have difficulty dealing with issues of death, teen sex, drug use, and homosexuality. If teachers are to do a good job of teaching about HIV/AIDS and other STDs, they need help and support.

  Staff training should happen on two levels. First, all staff (teachers, administrators, custodians, secretaries) should know how a person gets HIV and how to prevent HIV infection. They should know where to go for more information and help.

  Second, those staff who will be teaching about HIV need in-depth training. They need to look at their own ideas about sex, AIDS, and death. Teachers must know the facts and feel comfortable talking about sex. Teachers who are uneasy with these subjects should not have to teach an HIV unit. The students will pick up on their feelings.

- **Train students to teach other students about HIV.** Peer education programs have been very successful in many schools. Students often learn best from other students. See page 12 for where to get information on starting a peer education program.

- **Keep parents informed.** It is good to involve as many parents as possible in the HIV education program. You can plan an "AIDS Information Night" for parents and the community.

III. A Checklist for Picking A Good HIV Curriculum

Parents should think about the school's HIV curriculum. Or they should think about a curriculum they might want the school to use. Can all these questions about the curriculum be answered by a "yes"?

___ Is the curriculum right for the age of the child? Children go through stages. The curriculum must be right for the stage.

___ Does the curriculum help younger students get over their fear of AIDS?

___ Does the curriculum teach young children to refuse unwanted touch?

___ In grades 6 and up, students can talk about sex and health in more detail. Does the curriculum for the younger students (K-5) build a foundation for this?

___ Does the curriculum tell students simply and directly how HIV is transmitted and how to prevent getting HIV?

___ Does the curriculum support students who do not want to have sex or use alcohol and other drugs?

___ Does the curriculum teach the decision-making, communication and problem-solving skills students need to choose abstinence from alcohol, drug use, and sexual intercourse or how to negotiate safer sexual behaviors?

___ Does the curriculum say that sexual feelings are OK?

___ Does the curriculum tell students how to reduce their risk of HIV infection by using latex condoms? Does it teach them how to use a condom correctly? Does it teach them how to talk to sexual partners about using condoms? Students need this information and these skills whether or not they have sex now.

___ Does the curriculum use words the students understand?

___ Does the curriculum talk about high-risk **behaviors**, not high-risk **groups**?

___ Does the curriculum state strongly that **anyone** who engages in high-risk behaviors can get HIV, regardless of race, sex, age or whether the person is straight or gay?

___ Does the curriculum discuss sexual activity in a direct way that does not judge or preach?

___ Do any pictures or stories reflect people of different races and ethnic groups? Do they reflect different types of family groups?

___ Students need a lot of time to learn to act on all this new information. Is there plenty of time (several class periods) for each student to learn the skills to make healthy decisions?

Overall Program

___ Does the program pick teachers whom students trust? Are these teachers comfortable talking about HIV and sex? Are the teachers well-trained? 11

___ Do the non-English-speaking students get the same information in their own language?

___ Is the same information given to students with vision and hearing problems and physical handicaps?

___ Are the students taught in small groups?

___ Does someone update the curriculum as new information comes in?

___ Did parents, students, and other community people help set up the HIV education program?

___ Is there ongoing talk with parents about the curriculum?

___ Are the materials clear? Are they easy for the students to read?

IV. Resources

A. Guides, Manuals, and Bibliographies

National Coalition of Advocates for Students, 100 Boylston Street, Suite 737, Boston, MA 02116:

> ***Criteria for Evaluating an AIDS Curriculum***, revised 1992. $4.00.
>
> ***Guidelines for HIV and AIDS Student Support Services***, 1990. $4.00.

Center for Population Options, 1025 Vermont Ave. NW, Suite 210, Washington, DC 20005:

> ***Adolescents, AIDS and HIV: Resources for Educators -- An Annotated Bibliography of Print, Video and Audio Materials***, vol. VI, June 1991. $4.00.
>
> ***Guide to Implementing TAP: Teens for AIDS Prevention Peer Education Program***, 1990. $25.00.

Guidelines for Comprehensive Sexuality Education: Kindergarten - 12th Grade, Sex Information and Education Council of the US (SEICUS), 130 W. 42nd St., Suite 2500, New York, NY 10036, 1991. $5.75.

Debra Haffner and Diane de Mauro, ***Winning the Battle: Developing Support for Sexuality and HIV/AIDS Education***, 1991. $18.00.

Someone at School Has AIDS: A Guide to Developing Policies for Students and School Staff Members Who Are Infected with HIV, National Association of State Boards of Education, 1012 Cameron St., Alexandria, VA 22314, 1989. $5.00.

Establishing and Maintaining School Health Advisory Councils: A How-To Manual for Local Education Agencies, North Carolina Department of Public Instruction, Healthful Living Section, 116 W. Edenton St., Raleigh, NC 27603, 1991. Free.

Comprehensive School Health Education for Hispanic Youth: Insights About Curriculum Adaptation, Southwest Regional Educational Laboratory, 4665 Lampson Ave., Los Alamitos, CA 90720, 1991. $6.95.

Criteria for Comprehensive Health Education Curricula, American School Health Association, P.O. Box 708, Kent, OH 44240, 1990. $2.50.

Janet Collins and Patti Britton, ***Training Educators in HIV Prevention: An Inservice Manual***, Network Publications, P.O. Box 1830, Santa Cruz, CA 95061, 1990. $39.95.

Centers for Disease Control, ''Guidelines for Effective School Health Education To Prevent the Spread of AIDS," ***Morbidity and Mortality Weekly Report 37***, No. S-2, 1/29/88 (Supplement), Dept. of Health and Human Services Publication No. (CDC) 88-8017.

B. HIV Curricula

¡Viviremos! On the Road to Healthy Living: A Bilingual Curriculum on AIDS and HIV Prevention for Migrant Students (Spanish/English), National Coalition of Advocates for Students, 100 Boylston St., Suite 737, Boston, MA 02116, draft version 1990. $12.95.

M. Quakenbush and S. Villarreal, ***Does AIDS Hurt?: Educating Young Children About AIDS***, Network Publications, P.O. Box 1830, Santa Cruz, CA 95061, 2nd edition, 1992. $14.95.

W. Yarber, ***AIDS: What Young Adults Should Know*** (Instructor's Manual and Student Guide), AAHPERD, Publications, P.O. Box 704, Waldorf, MD 20601, 2nd ed., 1989. $13.45 (available in Spanish for $18.45).

M. Quakenbush and P. Sargent, ***Teaching AIDS: A Resource Guide on Acquired Immune-Deficiency Syndrome***, Network Publications, PO Box 1830, Santa Cruz, CA 95061, 3rd ed., 1992. $19.95.

C. HIV Videos

San Francisco Study Center, PO Box 5646, San Francisco, CA 94101; (415) 626-1650:

Teen AIDS in Focus (16 min.), 1989.

Between Friends (26 min.), 1990 (also available in Spanish).

Select Media, 74 Varick St., Suite 305, New York, NY 10013; (212) 431-8923:

Seriously Fresh (21 min.), 1991.

D. National AIDS Hotlines and Clearinghouses

CDC National AIDS Hotlines:

1-800-342-AIDS
AIDS information
24 hours a day

1-800-344-SIDA
AIDS information in Spanish
8 a.m. - 2 a.m. EST

1-800-227-8922
National STD Hotline

1-919-361-8488
National Herpes Hotline

1-800-AIDS-TTY
AIDS information for the hearing-impaired

CDC National AIDS Clearinghouse
P.O. Box 6003
Rockville, MD 20850
(800) 458-5231

Combined Health Information Database (CHID)
Centers for Disease Control National Center for
Chronic Disease Prevention and Health Promotion
1600 Clifton Rd. MS-K13
Atlanta, GA 30333
(404) 488-5080

APPENDIX A

Why Teens Are at Risk for Getting HIV Infection

Teenagers are at risk for HIV infection, AIDS, and other sexually transmitted diseases (STDs). Many teens have sex without using condoms. Many teens have sex with more than one person. Some teens inject illegal drugs or steroids. These behaviors spread HIV.

Some Facts About Teen Sex In The United States

- By the 12th grade, two thirds of all girls and three-quarters of all boys have had sex.[1]
- More than 1 million teenage girls become pregnant each year.[2]
- Fewer than half of students who have sex use condoms regularly.[3]
- A poll shows that teens who do not use birth control also:
  - cannot talk about sex with their parents;
  - do not get good information on sex and birth control from school or home or books.[4]
- Every year, 2.5 million teens are infected with a sexually transmitted disease (STD).[5]

Some Facts About Teen Drug Use

- A national survey of high school seniors shows:
  - 12% have used cocaine
  - Almost 5% have used crack
  - 1% have used heroin[6]

- Many crack users have sex often and with many different people. In one study, one third of male teens who use crack said they had sex with 10 or more people in the last year.[7]

- Teen dropouts inject drugs at a higher rate than youth who attend school.[8] Over 25% of all students drop out of school.[9]

Some Facts About Teens and AIDS

- HIV can stay in the body for many years before a person becomes sick. Twenty percent of people reported with AIDS were aged 20-29 when they were diagnosed.[10] Many of these people were infected with HIV when they were teens.

- Many teens still do not know the facts about HIV infection, AIDS, or other STDs. In one study, 23% of high school students thought they could tell whether a person had HIV by looking at him or her.[12]

- Teens of all races and incomes are at risk for HIV infection and AIDS. African Americans and Latinos have been particularly affected:

    - 12% of the United States population is African American, but 29% of people with AIDS are African American.
    - 9% of the United States population is Latino, but 16% of people with AIDS are Latino.[13]
    - 56% of all teens reported with AIDS are African American or Latino.

- Many teens feel they cannot get infected with HIV and do not worry about something that might not make them sick for many years. Teens also tend to take risks. They do not think about how they can get hurt.

End Notes

1. Centers for Disease Control, ***Morbidity and Mortality Weekly Report***, 40 (51,52): Jan. 3, 1992.

2. CD Hayes, ed., ***Risking the Future: Adolescent Sexuality, Pregnancy, and Childbearing***, vol. 1, Washington, DC, National Academy Press, 1987.

3. Centers for Disease Control, ***Morbidity and Mortality Weekly Report***, 40 (51,52): Jan. 3, 1992.

4. Louis Harris and Associates, ***American Teens Speak: Sex, Myths, TV and Birth Control***, a poll conducted for The Planned Parenthood Federation of American, 1986.

5. Division of STD/HIV Prevention, Centers for Disease Control, ***Annual Report***, Atlanta, 1989.

6. University of Michigan Institute for Social Research, ***The High School Senior Survey***, conducted for the National Institute on Drug Abuse, 1988.

7. R.E. Fullilove, et. al., "Risk of Sexually Transmitted Disease Among Black Adolescent Crack Users in Oakland and San Francisco, CA," ***Journal of American Medical Association***, 263:851.

8. N. Vaughn, "Education/Advocacy/Resource Development: Adolescent," paper written for Farmworker Substance Abuse Prevention Symposium, San Diego, CA, Oct. 1991.

9. M. Pallas, G. Natriello; E.L. McDill, "The Changing Nature of the Disadvantaged Population: Current Dimensions and Future Trends," ***Educational Researcher***, 18(5):16-22.

10. Centers for Disease Control, ***HIV/AIDS Surveillance***, Jan. 1992.

11. Centers for Disease Control, ***HIV/AIDS Surveillance***, Jan. 1990, Jan. 1992.

12. J.E. Anderson, "HIV/AIDS Knowledge and Sexual Behavior Among High School Students," ***Family Planning Perspectives***, 2:252.

13. Centers for Disease Control, ***HIV/AIDS Surveillance***, April 1992.

APPENDIX B

Basic Facts About HIV and AIDS

Schools should give students the simple, clear facts about HIV and AIDS.

What Is AIDS? What Is HIV?

Acquired immunodeficiency syndrome (AIDS) is a very complex and serious disease. AIDS is caused by a virus called the human immunodeficiency virus (HIV). HIV infects the body, particularly the immune system. Ordinarily, when a person gets an infection, the immune system responds and eradicates the infection. But infection with HIV is not eradicated by the immune system. The virus stays in a person's body for the rest of his or her life. HIV infection eventually weakens the immune system. After awhile (usually several years), the person develops diseases that a healthy person's immune system would easily fight off.

How Do People Get HIV and AIDS?

People do not get HIV from a hug, a sneeze, or a toilet seat. No one can get HIV or AIDS by giving blood. Several years ago (before 1985), some people got HIV from receiving blood transfusions. The blood was from people with HIV infection or AIDS. Now all blood donated in the United States is checked very carefully. Today blood that doctors in the United States give through a transfusion has been tested for HIV and several other infectious agents.

People can get HIV in three ways:

1. A person can get HIV by vaginal sex, anal sex, or oral sex with an infected partner. A person can get HIV from the semen of a

man with HIV. A person can get HIV from the secretions in the vagina of a woman with HIV.

2. A person can get HIV from the blood of another person with HIV. This can happen by sharing drug needles or syringes. It can also happen by sharing a needle used for tattoos; for injecting vitamins, body-building hormones, or other medicines; for piercing ears or any other body parts.

3. A baby can get HIV from its mother. Such transmission can happen during pregnancy or during birth. HIV can also be passed to a baby during breast-feeding.

ANYONE who has sex or shares needles can get HIV. This is true for men and women. This is true for gay and straight people. This is true for all ages and races.

The Range of HIV Infection

Many people with HIV look fine. They feel fine. They may not know they are infected. But they can pass HIV to others. They can pass the virus by having sexual intercourse or by sharing needles. A mother can pass the virus to her baby while she is pregnant.

Most people infected with HIV will get sick. But most will not get sick until 3 to 10 years after they first get infected. People with HIV sometimes show a set of symptoms related to AIDS. They might be only mildly ill or they might be very sick. There are medicines to treat HIV infected people, but they do not cure the infection. They do help infected people maintain good health and prevent the onset or development of AIDS for months and years.

The last stage of HIV infection is AIDS. AIDS can include very serious infections for which there may be no treatment or only experimental treatments. It can also include cancers, brain disorders, and psychological problems.

Counseling and Testing

A person can discuss their personal situation privately and get his or her blood tested for HIV. A person should consider getting counseling and being tested if he or she has:

- Had sex with more than one person.
- Had any sexually transmitted disease such as herpes or gonorrhea.
- Had sex with someone who might be at risk for HIV infection.
- Had sex with someone who injects drugs.
- Shared drug injection equipment.

The local Department of Public Health has a list of places that give the blood tests. The addresses of counseling and testing sites are

also available from the National AIDS Hotline (1-800-342-AIDS). It is important that a person receive counseling before and after the test.

Teens Can Prevent HIV By:

- Not having sex at all.
- Always using a latex condom if they do have sex. Condoms must be used correctly from beginning to end in all kinds of sex.
- Not using intravenous drugs.
- Never sharing needles or syringes if they do use drugs. Never share needles for tattoos, body-building hormones, ear piercing, vitamins or other medicines. Teens doing drugs should go to a drug treatment program.

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